



Work Order (Bid Form)

WORK ORDER INFORMATION

Work Order Name:

Work Order Type: Weatherization

Audit Name: MADISON

CLIENT INFORMATION

Client Name:

Address:

Client ID:

Alt. Client ID: 16016SW-0980

AGENCY INFORMATION

Agency: SWHRA

Agency Phone: (731) 989-5111

Address: 1574 White AVE
Henderson, TN

Fax:

Email Address:

Agency Contact: Murley, Rickey

Work Phone:

Cell Phone:

Email Address:

Company Name & License Number: _____

Contractor's Signature: _____

COMMENT

NOTICE:

All work performed and material must meet all requirements as stated in the Southeast Weatherization Field Guide. It is the contractor's responsibility to pull all necessary permits required for the town or county where the work is being performed. No change order work shall be done until the change order has been approved and signed. If heater is required no air sealing should be done before heater is installed.

731-422-4830

Measures

| Measure 1 Seal Ducts | | | | Components | | | | | | Inspected |
|----------------------|---------------------------------|------------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|--------------------------|
| Comment | | | | | | | | | | <input type="checkbox"/> |
| | | | | Estimated | | | Actual | | | |
| # | Material / Labor | Description / Comment | Units | Qty | Unit Cost | Total | Qty | Unit Cost | Total | |
| 1 | Construction Materials/Hardware | Mastic duct boots and joints | Each | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| 2 | Labor | Labor | Hour | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Other Detail | | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Measure Sub Total: | | | | | | <input type="text"/> | Sub Total: | | <input type="text"/> | |
| Field Notes: | | | | | | | | | | |

| Measure 2 Attic Ins. R-30 | | | | Components A1 | | | | | | Inspected |
|---------------------------|---------------------------------|-------------------------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|--------------------------|
| Comment | | | | | | | | | | <input type="checkbox"/> |
| | | | | Estimated | | | Actual | | | |
| # | Material / Labor | Description / Comment | Units | Qty | Unit Cost | Total | Qty | Unit Cost | Total | |
| 1 | Insulation | Attic Insulation - Blown Cellulose - R-30 | SqFt | 2053 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| 2 | Labor | Labor | Hour | 2053 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| 3 | Construction Materials/Hardware | New pull down stairs and insulated cover | Each | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| 4 | Labor | Labor | Hour | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Other Detail | | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Measure Sub Total: | | | | | | <input type="text"/> | Sub Total: | | <input type="text"/> | |
| Field Notes: | | | | | | | | | | |

| Measure 3 DWH Tank Insulation | | | | Components | | | | Inspected | |
|-------------------------------|----------------------|-----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|--------------------------|----------------------|
| Comment | | | | | | | | <input type="checkbox"/> | |
| | | | | Estimated | | Actual | | | |
| # | Material / Labor | Description / Comment | Units | Qty | Unit Cost | Total | Qty | Unit Cost | Total |
| 1 | Hot Water Equipment | DHW Tank Insulation | Each | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | Labor | Labor | Each | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Other Detail | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Measure Sub Total: | | | | | | <input type="text"/> | Sub Total: | | <input type="text"/> |
| Field Notes: | | | | | | | | | |

| Measure 4 CO Monitor is Needed | | | | Components | | | | Inspected | |
|--------------------------------|-------------------------|-----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|--------------------------|----------------------|
| Comment | | | | | | | | <input type="checkbox"/> | |
| | | | | Estimated | | Actual | | | |
| # | Material / Labor | Description / Comment | Units | Qty | Unit Cost | Total | Qty | Unit Cost | Total |
| 1 | Health and Safety Items | CO monitor | Each | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | Labor | Labor | Hour | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Other Detail | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Measure Sub Total: | | | | | | <input type="text"/> | Sub Total: | | <input type="text"/> |
| Field Notes: | | | | | | | | | |

| Measure 5 PressureRelief Piping Needed | | | | Components | | | Inspected | | |
|----------------------------------------|-------------------------|------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Comment | | | | | | | | | |
| | | | | Estimated | | | Actual | | |
| # | Material / Labor | Description / Comment | Units | Qty | Unit Cost | Total | Qty | Unit Cost | Total |
| 1 | Health and Safety Items | Pressure relief piping | Each | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | Labor | Labor | Hour | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Other Detail | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Measure Sub Total: | | | | | | <input type="text"/> | Sub Total: | | <input type="text"/> |
| Field Notes: | | | | | | | | | |

| Measure 6 Smoke Detector is Needed | | | | Components | | | Inspected | | |
|------------------------------------|-------------------------|-----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Comment | | | | | | | | | |
| | | | | Estimated | | | Actual | | |
| # | Material / Labor | Description / Comment | Units | Qty | Unit Cost | Total | Qty | Unit Cost | Total |
| 1 | Health and Safety Items | Smoke detector | Each | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2 | Labor | Labor | Hour | 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Other Detail | | | | | | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Measure Sub Total: | | | | | | <input type="text"/> | Sub Total: | | <input type="text"/> |
| Field Notes: | | | | | | | | | |
| Work Order Grand Total: | | | | | | <input type="text"/> | Grand Total: | | <input type="text"/> |